

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		07/19/00
O.I.P.E. CLASSIFIER	<i>[Signature]</i>		
FORMALITY REVIEW	NL	533	7-11-00
RESPONSE FORMALITY REVIEW			8-25-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheets

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